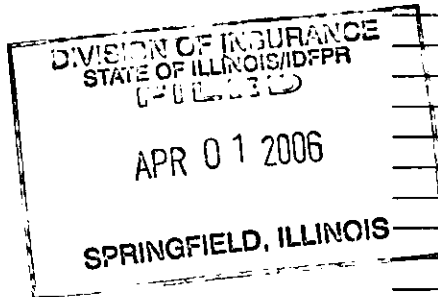


ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 04/01/2006.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	18,804,841	+ 4.3 %
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify NoBrief description of filing (if filing follows rates of an advisory organization, specify organization) Adopt 1/1/06 Advisory Rates and change ACE Property and Casualty Insurance Company's Deviation from 3% to 0%

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

ACE PROPERTY & CASUALTY INSURANCE COMPANY

Name of Company

Joe Binkowski – WC Product Line Manager

Official — Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 5/1/2006

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Comp</u> Line of Insurance	46,682,939	8.8%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

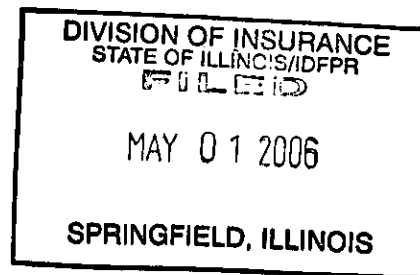
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Filing to adopt NCCI's advisory rates, loss costs and rating values pursuant to NCCI Approval Circular IL-2005-11 effective May 1, 2006, and also includes an adjustment to our Class List IV-C deviations from -20% to -10%.

*Adjusted to reflect all prior rate changes.

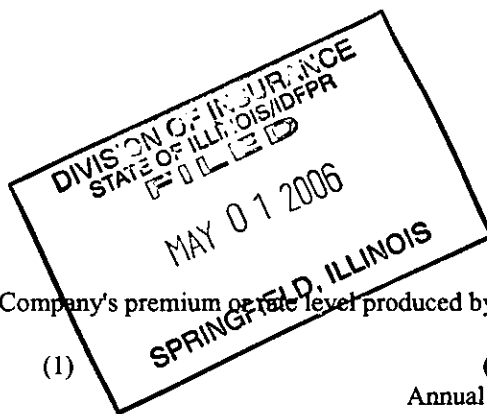
**Change in Company's premium level which will result from application of new rates.

Accident Fund Insurance Company of America
Name of Company

Fred Van Streain, CPCU, Compliance Advisor
Official - Title



Form (RF-3)



SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective May 1, 2006

(1)	(2)	(3)
<u>Coverage</u>	<u>Annual Premium Volume (Illinois)*</u>	<u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Comp</u> <u>Line of Insurance</u>	\$1,029,789	+1%

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

na

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adopting NCCI's rates per Bulletin IL-2005-11 and introducing loss costs multiplier and revising minimum premium.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

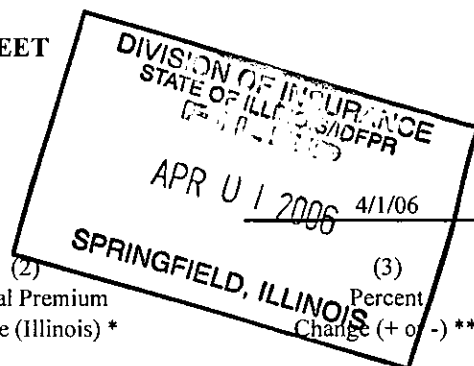
All America Ins Co
Name of Company

(Mrs.) Petrise Meyer
Sr Rates and Forms Analyst
Official - Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective:



(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+ or -) **
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation		
16. Other:		

Does filing only apply to certain territory (territories) or certain classes? If so, specify.

Not Applicable

Brief description of filing (if filing follows rates of an advisory organization, specify organization).

CNA is filing to adopt the 1/1/06 NCCI rates for the state of Illinois, as approved in NCCI Circular IL-2005-11, with an effective date of 4/1/06.

* In-force Written Premium

** Change in Company's premium level which will result from application of new rates.

American Casualty Company of Reading, PA
Name of Company

David Levy - Actuarial Analyst
Official - Title

Form (RF-3)

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 04/01/2006

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>4,257,642</u>	<u>3.1%</u>
<u>Line of Insurance</u>		

as of calendar year ending 12/2005)

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

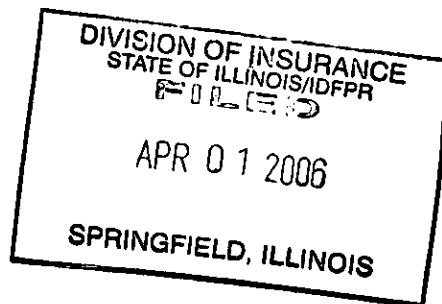
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Effective 4/1/06, we wish to adopt NCCT's 1/1/06 loss costs and minimum premium formula and decrease our LCM from 1.58 to 1.52.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.



American Economy Insurance Company
Name of Company

Patty McCollum
Patty McCollum,
Assistant Vice President
Official - Title

H29219D

SUMMARY SHEET

FORM (RF-3)

Change in Company's premium or rate level produced by rate revision
Effective May 1, 2006

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Comp.</u>	<u>\$16,999,436</u>	<u>+1.4%</u>

Does filing only apply to certain territory (territories) or certain classes? No

If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
Organization, specify organization): Circular IL-2005-11 NCCI Adoption/Delay
Decrease Deviation from +33% to +25%

*Adjusted to reflect all prior rate changes.

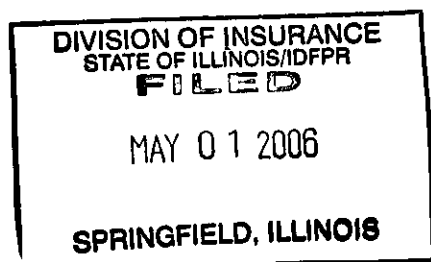
**Change in Company's premium level which will
result from application of new rates.

AMERICAN FAMILY MUTUAL INS. CO.
Name of Company

James P. Meyer

Official - Title

James P. Meyer, ACP, AIM
Senior Pricing Analyst/Filings



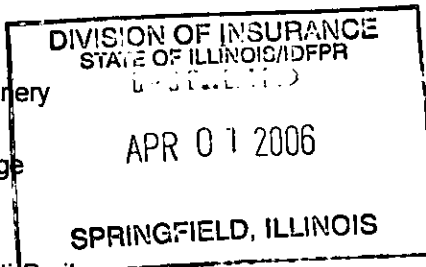
Illinois

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 4/1/2006

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or-)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$ 14,065,878	6.43%
16. Other _____		
Line of Insurance		



Does filing only apply to certain territory (territories) or certain classes? If so, specify N/A

Brief description of filing (if filing follows rates of an advisory organization, specify organization) Adoption of 1/1/2006 NCCI Advisory Loss Costs with a delayed effective date of April 1, 2006. To be effective for all new and renewal policies on and after April 1, 2006.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

American Interstate Insurance Company
Name of Company

Kathy Wells, State Filing Coordinator
Official — Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 04/01/2006

(1)	(2)	(3)
<u>Coverage</u>	<u>Annual Premium Volume (Illinois)*</u>	<u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$ 4,744,053</u>	<u>3.7%</u>
<u>Line of Insurance</u>		

(as of calendar year ending 12/2005)

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Effective 4/1/06, we wish to adopt NCCT's 1/1/06 loss costs and minimum premium formula and decrease our LCM from 1.75 to 1.69.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

H29219D


American States Insurance Company
 Name of Company

Patty McCollum,
 Assistant Vice President
 Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective May 1, 2005

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	\$287,000	6.3%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

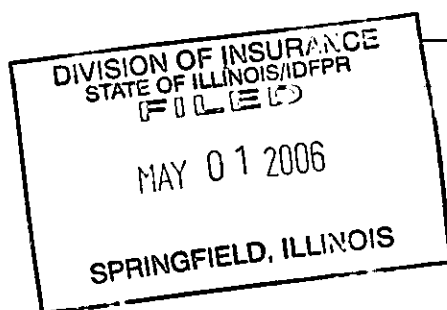
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): delay adoption of NCCI
with no change to deviations

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Amerisure Insurance Company
Name of Company

Compliance Manager
Official - Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective May 1, 2006

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u> Line of Insurance	\$1,089,000	6.3%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

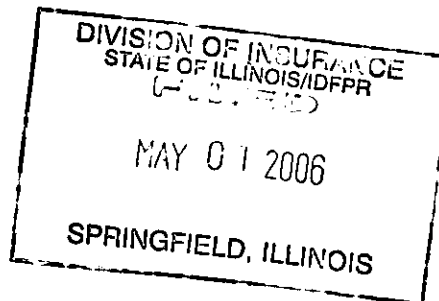
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): delay adoption of NCCI with no change to deviations

*Adjusted to reflect all prior rate changes.

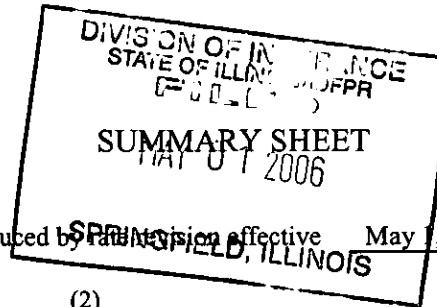
**Change in Company's premium level which will result from application of new rates.

Amerisure Mutual Insurance Company
Name of Company

Compliance Manager
Official - Title



Form (RF-3)



Change in Company's premium or rate level produced by this filing effective May 1, 2006

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Comp</u>	\$8,854,098	+1%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

na

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adopting NCCI's rates per Bulletin IL-2005-11 and introducing loss costs multiplier and revising minimum premium.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Central Mutual Ins Co

Name of Company

(Mrs.) Petrise Meyer

Sr Rates and Forms Analyst

Official - Title

H29219D

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/1/06

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	\$42,641,533.	+6.7%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: All classes and codes are affected.

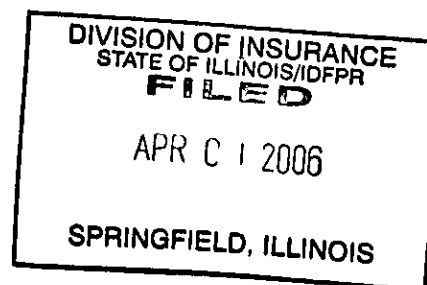
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting NCCI's rates effective 4/1/06. Also, we are filing a revision to an existing exception page, clarifying how we apply our waiver of subrogation flat charge. Finally, we are filing new exception pages which show we are deviating from NCCI's increased minimum premiums. Each code which is being deviated is listed on these pages and the actual minimum premium we are using is listed.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

The Cincinnati Casualty Company
Name of Company

Connie Petertonies - Analyst
Official - Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 4/1/06

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	\$10,950,624.	+6.2%
Line of Insurance		

 Does filing only apply to certain territory (territories) or certain classes? If so, specify: All classes and codes are affected.

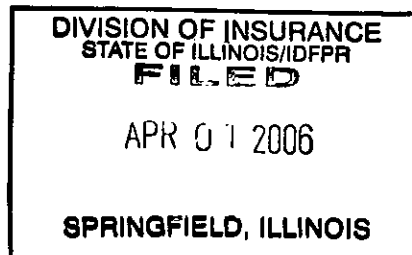
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting NCCI's rates effective 4/1/06. Also, we are filing a revision to an existing exception page, clarifying how we apply our waiver of subrogation flat charge. Finally, we are filing new exception pages which show we are deviating from NCCI's increased minimum premiums. Each code which is being deviated is listed on these pages and the actual minimum premium we are using is listed.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

The Cincinnati Indemnity Company
Name of Company

Connie Peteronies - Analyst
Official - Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/1/06

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	\$6,945,144.	+5.7%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: All classes and codes are affected.

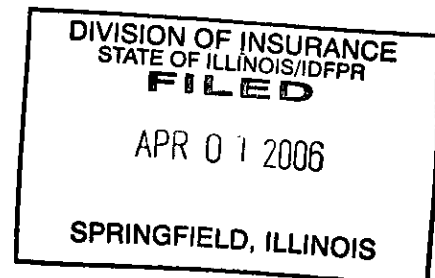
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting NCCI's rates effective 4/1/06. Also, we are filing a revision to an existing exception page, clarifying how we apply our waiver of subrogation flat charge. Finally, we are filing new exception pages which show we are deviating from NCCI's increased minimum premiums. Each code which is being deviated is listed on these pages and the actual minimum premium we are using is listed.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

The Cincinnati Insurance Company
Name of Company

Connie Petertonjes - Analyst
Official - Title



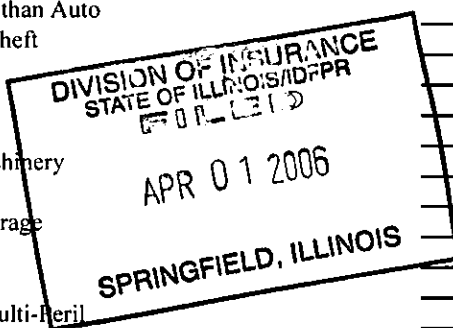
ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective:

4/1/06

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+ or -) **
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	6,673,491	6.4%
16. Other:		



Does filing only apply to certain territory (territories) or certain classes? If so, specify.

Not Applicable

Brief description of filing (if filing follows rates of an advisory organization, specify organization).

CNA is filing to adopt the 1/1/06 NCCI rates for the state of Illinois, as approved in NCCI Circular IL-2005-11, with an effective date of 4/1/06.

* In-force Written Premium

** Change in Company's premium level which will result from application of new rates.

Continental Casualty Company

Name of Company

David Levy - Actuarial Analyst

Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate Revision effective **4/1/06**

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>WC</u>	<u>\$4,275,291.</u>	<u>+9.95%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

NO

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):

For all classes except 0042, 5022, 5551, 6217, 7228, 7229, 9082, and 9083 adopt NCCI loss costs and miscellaneous values dated effective January 1, 2006. Our Company rate pages are revised. Revise Company expense constant displayed on Exception Page CWIC-R1d.

* Adjusted to reflect all prior rate changes.

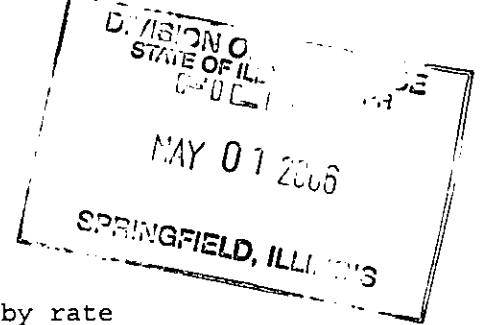
** Change in Company's premium level which will result from application of new rates.

Continental Western Insurance Company

Name of Company

Sharon Winter, PCU
Statistical and Research Analyst

Official - Title



Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 1/1/06

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Automobile		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$ 303,165</u>	<u>+24.8% *</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Adoption of the NCCI Loss Costs IL-2005-11
And amendment of multiplier

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

Employers Fire Insurance Company
Name of Company

Sharon Sansone

Sharon Sansone, Assistant Vice President Workers
Compensation

Official -Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective May 1, 2006

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois) *</u>	(3) <u>Percent Change (+ or -) **</u>
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	13,806,401	7.3 6.8 %
<u>Line of Insurance</u>		

DIVISION OF INSURANCE
STATE OF ILLINOIS
FBI
MAY 11 2006
SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are revising our multiplier and deviations on some class codes. The impact is +7.3% change in
our premium level.

* Adjusted to reflect all prior rate changes.

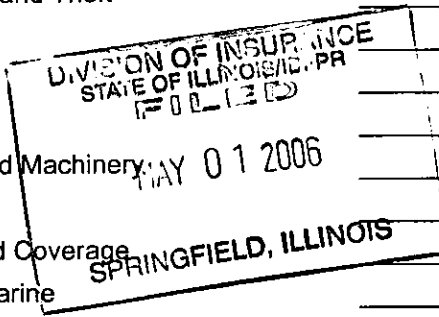
** Change in Company's premium level which
will result from application of new rates.

Federated Mutual Ins. Co.
Name of Company
Brad Hanson – Vice President
Official – Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective May 1, 2006

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois) *</u>	(3) <u>Percent Change (+ or -) **</u>
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	80,269	+ 7.3 00%
<u>Line of Insurance</u>		



Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are revising our multiplier and deviations on some class codes. The impact is +7.3% change in
our premium level.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which
will result from application of new rates.

Federated Service Ins. Co.
Name of Company
Brad Hanson - Vice President
Official - Title

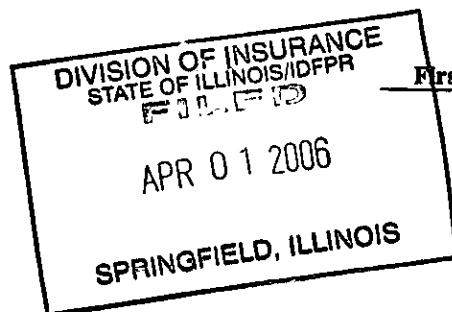
SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 04/01/2006

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$4,944,491</u>	<u>6.3%</u>

(Direct WP as of calendar year ending 12/2005)

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No.Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Effective 4/1/06, we are adopting NCCI's 1/1/06 loss costs with no change to our LCM of 1.88.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.First National Insurance Company of America
Name of Company

A handwritten signature in cursive script, appearing to read "Patty McCollum".

Patty McCollum,
Assistant Vice President

Official - Title

SUMMARY SHEETChange in Company's premium or rate level produced by rate revision effective 04/01/2006

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$ 2,294,231</u>	<u>3.9%</u>
Line of Insurance		

(as of calendar year ending 12/2005)

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

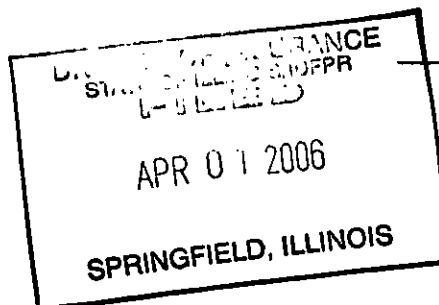
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Effective 4/1/06, we wish to adopt NCCT's 1/1/06 loss costs and minimum premium formula and decrease our LCM from 1.93 to 1.86.

* Adjusted to reflect all prior rate changes.

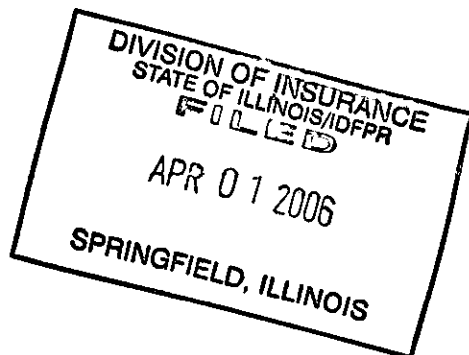
** Change in Company's premium level which will result from application of new rates.

General Insurance Company of America
Name of Company

Patty McCollum,
Assistant Vice President
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEETChange in Company's premium or rate level produced by
rate revision effectiveApril 1, 2006

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	<u>2,485,238</u>	<u>6.8%</u>
Line of Insurance		



Does this filing only apply to certain territory (territories) or certain classes?

If so, specify:

No

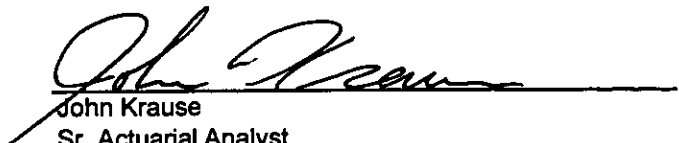
Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Hartford Accident and Indemnity Co. will deviate -25% from the group rates.
Including a loading for our own expenses with an expense multiplier of 1.235.

* Adjusted to reflect all prior rate changes.

** Change in the company's premium level which will result from application of new rates.

Hartford Accident and Indemnity Company
Name of Company


John Krause
Sr. Actuarial Analyst
Official-Title

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEETChange in Company's premium or rate level produced by
rate revision effective

April 1, 2006



(1) Coverage		(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers' Compensation</u>	<u>7,595,575</u>	<u>6.8%</u>
	<u>Line of Insurance</u>		

Does this filing only apply to certain territory (territories) or certain classes?
If so, specify:

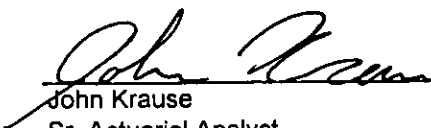
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Hartford Casualty Insurance Company will deviate -5% from the group rates.
Including a loading for our own expenses with an expense multiplier of 1.564.

* Adjusted to reflect all prior rate changes.

** Change in the company's premium level which will result from application of new rates.

Hartford Casualty Insurance Company
Name of Company

 John Krause
Sr. Actuarial Analyst
 Official-Title

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEETChange in Company's premium or rate level produced by
rate revision effective

April 1, 2006

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	7,671,825	6.8%
Line of Insurance		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED

APR 01 2006

SPRINGFIELD, ILLINOIS

Does this filing only apply to certain territory (territories) or certain classes?

If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Hartford Fire Insurance Company will deviate -10% from the group rates.
Including a loading for our own expenses with an expense multiplier of 1.481.

* Adjusted to reflect all prior rate changes.

** Change in the company's premium level which will result from application of new rates.

Hartford Fire Insurance Company

Name of Company


John Krause

Sr. Actuarial Analyst

Official-Title

Filing Date: 12/29/05

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEETChange in Company's premium or rate level produced by
rate revision effective

April 1, 2006

(1) Coverage		(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers' Compensation</u>	3,805,724	6.8%
	Line of Insurance		

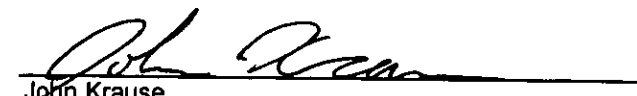
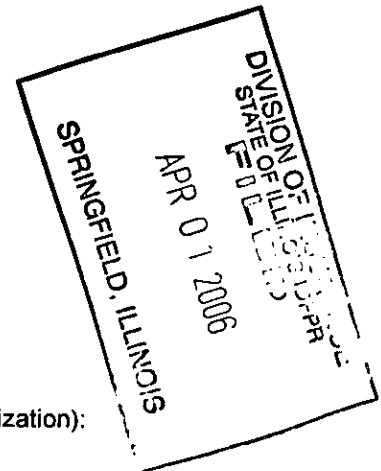
Does this filing only apply to certain territory (territories) or certain classes?
If so, specify: _____ No _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Hartford Insurance Company of Illinois will deviate -20% from the group rates.
Including a loading for our own expenses with an expense multiplier of 1.317.

* Adjusted to reflect all prior rate changes.

** Change in the company's premium level which will result from application of new rates.

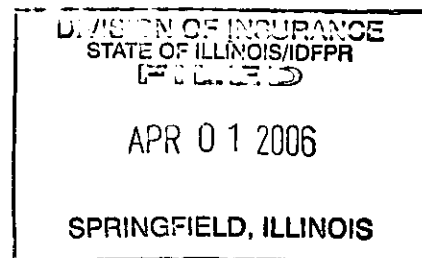
Hartford Insurance Company of Illinois
Name of Company

 John Krause
Sr. Actuarial Analyst
 Official-Title


Filing Date: 12/29/05

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEETChange in Company's premium or rate level produced by
rate revision effective

April 1, 2006

(1) Coverage		(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers' Compensation</u>	26,589,701	6.8%
	<u>Line of Insurance</u>		



Does this filing only apply to certain territory (territories) or certain classes?

If so, specify:

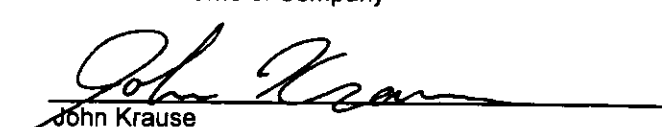
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Hartford Insurance Company of the Midwest will deviate -15% from the group rates.
Including a loading for our own expenses with an expense multiplier of 1.399.

* Adjusted to reflect all prior rate changes.

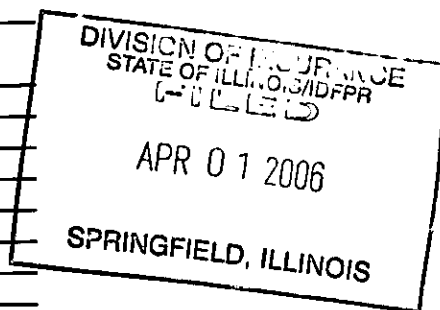
** Change in the company's premium level which will result from application of new rates.

Hartford Insurance Company of the Midwest
Name of Company

 John Krause
Sr. Actuarial Analyst
 Official-Title

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEETChange in Company's premium or rate level produced by
rate revision effective

April 1, 2006

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	23,288,184	6.8%
Line of Insurance		

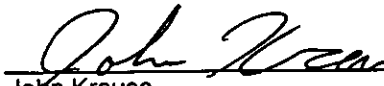
Does this filing only apply to certain territory (territories) or certain classes?
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Hartford Underwriters Insurance Company will deviate 10% from the group rates.
Including a loading for our own expenses with an expense multiplier of 1.811.

* Adjusted to reflect all prior rate changes.

** Change in the company's premium level which will result from application of new rates.

Hartford Underwriters Insurance Company
Name of Company

 John Krause
 Sr. Actuarial Analyst
 Official-Title

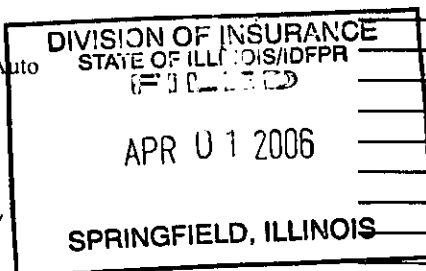
ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective:

4/1/06

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	3,074,448	5.7%
16. Other:		



Does filing only apply to certain territory (territories) or certain classes? If so, specify.

Not Applicable

Brief description of filing (if filing follows rates of an advisory organization, specify organization).

CNA is filing to adopt the 1/1/06 NCCI rates for the state of Illinois, as approved in NCCI Circular IL-2005-11, with an effective date of 4/1/06.

* In-force Written Premium

** Change in Company's premium level which will result from application of new rates.

National Fire Insurance Company of Hartford
Name of Company

David Levy - Actuarial Analyst
Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective 1/1/06

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$33,914</u>	<u>+3.9 %</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?

If so, specify: No

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Adoption of the NCCI Loss Costs IL-2005-11

And amendment of multiplier

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

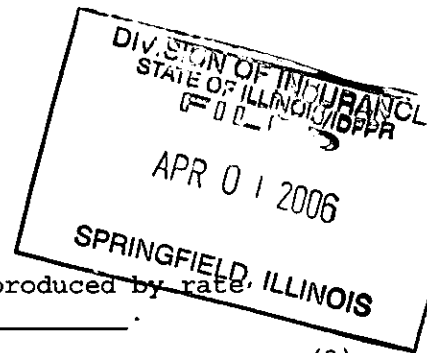
OneBeacon America Insurance Company
Name of Company

Sharon Sansone
Sharon Sansone, Assistant Vice President Workers
Compensation

Official -Title

Form (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate
revision effective 4/1/2006

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	25,211,110	+3.0%
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: - No -

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopt the 1/1/2006 NCCI advisory rates with class deviations as listed on the attachment.

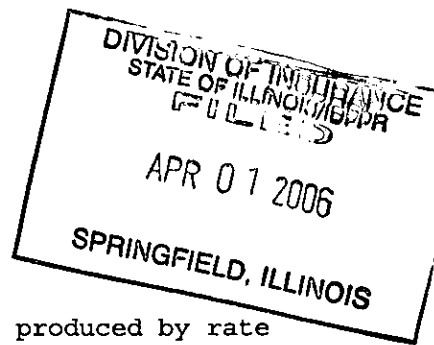
- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

Sentry Insurance A Mutual Company
Name of Company

Janel Danczyk - Product Management Sr Analyst
Official - Title

Form (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate
revision effective 4/1/2006

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
2. Automobile Physical Damage Private Passenger Commercial	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
3. Liability Other Than Auto	<hr/>	<hr/>
4. Burglary and Theft	<hr/>	<hr/>
5. Glass	<hr/>	<hr/>
6. Fidelity	<hr/>	<hr/>
7. Surety	<hr/>	<hr/>
8. Boiler and Machinery	<hr/>	<hr/>
9. Fire	<hr/>	<hr/>
10. Extended Coverage	<hr/>	<hr/>
11. Inland Marine	<hr/>	<hr/>
12. Homeowners	<hr/>	<hr/>
13. Commercial Multi-Peril	<hr/>	<hr/>
14. Crop Hail	<hr/>	<hr/>
15. Other <u>Workers' Compensation</u>	<u>6,146,820</u>	<u>-3.0%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: - No -

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Adopt 1/1/2006 NCCI advisory rates with
class deviations as listed on the attachment.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
 result from application of new rates.

Sentry Select Insurance Company - Dealer Operations
Name of Company

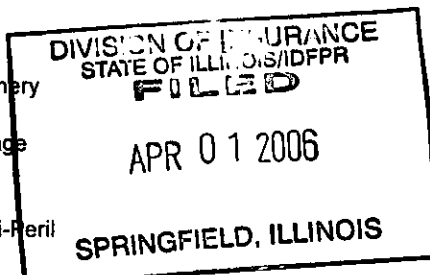
Janel Danczyk - Product Management Sr Analyst
Official - Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 04/01/06

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger	0	0
Commercial	0	0
2. Automobile Physical Damage		
Private Passenger	0	0
Commercial	0	0
3. Liability Other than Auto	0	0
4. Burglary and Theft	0	0
5. Glass	0	0
6. Fidelity	0	0
7. Surety	0	0
8. Boiler and Machinery	0	0
9. Fire	0	0
10. Extended Coverage	0	0
11. Inland Marine	0	0
12. Homeowners	0	0
13. Commercial Multi-Peril	0	0
14. Crop Hail	0	0
15. Workers Compensation	12 months ending 1/31/06: Written 13.3M Earned \$12.2M	6.3% per National Council on Compensation Insurance filing circular IL-2005-11
16. Other _____ Line of Insurance	0	0



Does filing only apply to certain territory (territories) or certain classes? If so, specify No – although previous filings proposed deviations to some class codes, and this filing proposes to keep these deviations in place.

Brief description of filing (if filing follows rates of an advisory organization, specify organization) Adopt rates per National Council on Compensation Insurance approval circular IL-2005-11, while maintaining the previously approved additional miscellaneous values page.

* Adjusted to reflect all prior rate changes. Historical rate changes for the past year have been negligible (e.g. impact of last class code deviation is +0.1%. As such, actual is shown).

** Change in Company's premium level which will result from application of new rates.

Technology Insurance Company _____
Name of Company

Submitted by: J. Shoenfelt, ACAS, FCA
Consultant, Shoenfelt Consulting, Inc.
Official — Title

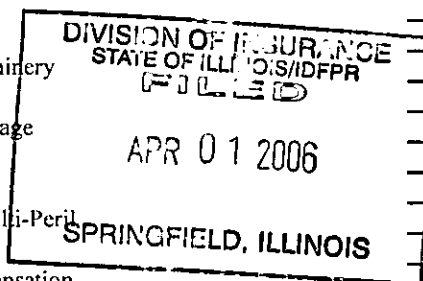
ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective:

4/1/06

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	27,378,187	6.5%
16. Other:		



Does filing only apply to certain territory (territories) or certain classes? If so, specify.

Not Applicable

Brief description of filing (if filing follows rates of an advisory organization, specify organization).

CNA is filing to adopt the 1/1/06 NCCI rates for the state of Illinois, as approved in NCCI Circular IL-2005-11, with an effective date of 4/1/06.

* In-force Written Premium

** Change in Company's premium level which will result from application of new rates.

Transcontinental Insurance Company

Name of Company

David Levy - Actuarial Analyst

Official - Title

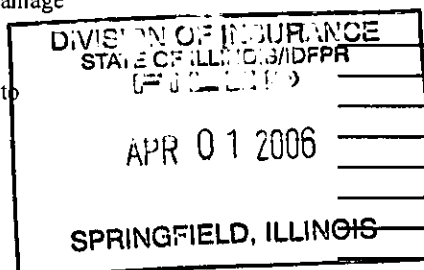
ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective:

4/1/06

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1 . Automobile Liability		
Private Passenger		
Commercial		
2 . Automobile Physical Damage		
Private Passenger		
Commercial		
3 . Liability Other than Auto		
4 . Burglary and Theft		
5 . Glass		
6 . Fidelity		
7 . Surety		
8 . Boiler and Machinery		
9 . Fire		
10 . Extended Coverage		
11 . Inland Marine		
12 . Homeowners		
13 . Commercial Multi-Peril		
14 . Crop Hail		
15 . Workers Compensation	2,458,838	9.5%
16 . Other:		



Does filing only apply to certain territory (territories) or certain classes? If so, specify.

Not Applicable

Brief description of filing (if filing follows rates of an advisory organization, specify organization).

CNA is filing to adopt the 1/1/06 NCCI rates for the state of Illinois, as approved in NCCI Circular IL-2005-11, with an effective date of 4/1/06.

* In-force Written Premium

** Change in Company's premium level which will result from application of new rates.

Transportation Insurance Company
Name of Company

David Levy - Actuarial Analyst
Official - Title

Filing Date: 12/29/05

ILLINOIS DEPARTMENT OF INSURANCE
SUMMARY SHEETChange in Company's premium or rate level produced by
rate revision effective

April 1, 2006

(1) Coverage		(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers' Compensation</u>	52,167,601	6.8%
	<u>Line of Insurance</u>		

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDFPR
FILED

APR 01 2006

SPRINGFIELD, ILLINOIS

Does this filing only apply to certain territory (territories) or certain classes?
If so, specify:


No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Twin City Fire Insurance Company will not deviate from the group rates.
Including a loading for our own expenses with an expense multiplier of 1.646.

* Adjusted to reflect all prior rate changes.

** Change in the company's premium level which will result from application of new rates.

Twin City Fire Insurance Company
Name of Company
John Krause
Sr. Actuarial Analyst
Official-Title

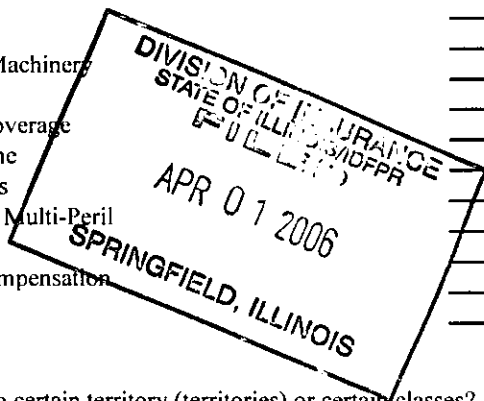
ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective:

4/1/06

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+ or -) **
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	4,221,087	10.0%
16. Other:		



Does filing only apply to certain territory (territories) or certain classes? If so, specify.

Not Applicable

Brief description of filing (if filing follows rates of an advisory organization, specify organization).

CNA is filing to adopt the 1/1/06 NCCI rates for the state of Illinois, as approved in NCCI Circular IL-2005-11, with an effective date of 4/1/06.

* In-force Written Premium

** Change in Company's premium level which will result from application of new rates.

Valley Forge Insurance Company
Name of Company

David Levy - Actuarial Analyst
Official - Title